U.S. ARMY CORPS OF ENGINEERS APPLICATION FOR DEPARTMENT OF THE ARMY PERMIT

33 CFR 325. The proponent agency is CECW-CO-R.

Form Approved -OMB No. 0710-0003 Expires: 30-SEPTEMBER-2015

Public reporting for this collection of information is estimated to average 11 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of the collection of information, including suggestions for reducing this burden, to Department of Defense, Washington Headquarters, Executive Services and Communications Directorate, Information Management Division and to the Office of Management and Budget, Paperwork Reduction Project (0710-0003). Respondents should be aware that notwithstanding any other provision of law, no person shall be subject to any penalty for failing to comply with a collection of information if it does not display a currently valid OMB control number. Please DO NOT RETURN your form to either of those addresses. Completed applications must be submitted to the District Engineer having jurisdiction over the location of the proposed activity.

PRIVACY ACT STATEMENT

Authorities: Rivers and Harbors Act, Section 10, 33 USC 403; Clean Water Act, Section 404, 33 USC 1344; Marine Protection, Research, and Sanctuaries Act, Section 103, 33 USC 1413; Regulatory Programs of the Corps of Engineers; Final Rule 33 CFR 320-332. Principal Purpose: Information provided on this form will be used in evaluating the application for a permit. Routine Uses: This information may be shared with the Department of Justice and other federal, state, and local government agencies, and the public and may be made available as part of a public notice as required by Federal law. Submission of requested information is voluntary, however, if information is not provided the permit application cannot be evaluated nor can a permit be issued. One set of original drawings or good reproducible copies which show the location and character of the proposed activity must be attached to this application (see sample drawings and/or instructions) and be submitted to the District Engineer having jurisdiction over the location of the proposed activity. An application that is not completed in full will be returned.

that is not completed in full will b	pe returned.						
	(ITEMS 1 THRU 4 TO BE	FILLED BY THE CORPS)					
1. APPLICATION NO.	2. FIELD OFFICE CODE	3. DATE RECEIVED	4. DATE APPLICATION COMPLETE				
	(ITEMS BELOW TO BE	FILLED BY APPLICANT)					
5. APPLICANT'S NAME		AUTHORIZED AGENT'S NAME AND TITLE (agent is not required)					
First - Steve Middle	Last - Wright	First - Michael Middle -	Last - Ritorto				
Company - Columbia Falls Al	uminum Company (CFAC)	Company - Roux Associates					
E-mail Address - swright@cfalt	ıminum.com	E-mail Address - mritorto@rouxinc.com					
6. APPLICANT'S ADDRESS:		9. AGENT'S ADDRESS:					
Address- 2000 Aluminum Dr	ive	Address- 209 Shafter Street					
City - Columbia Falls State	e - MT Zip - 59912 Country - USA	City - Islandia State -	NY Zip - 11749 Country - USA				
7. APPLICANT'S PHONE NOs. V	w/AREA CODE	10. AGENTS PHONE NOs. W/AREA CODE					
a. Residence b. Bus	iness c. Fax 92-8211 406-892-8238	a. Residence b. Busine 631-445-4576 631-630-					
TOO-0.			-2370				
		AUTHORIZATION					
11. I hereby authorize, Michael Ritorto to act in my behalf as my agent in the processing of this application and to furnish, upon request, supplemental information in support of this permit application. Stem Ward 2016-05-11 SIGNATURE OF APPLICANT DATE							
	NAME, LOCATION, AND DESCRI	PTION OF PROJECT OR ACTIVITY					
12. PROJECT NAME OR TITLE Columbia Falls Aluminum Co	•						
13. NAME OF WATERBODY, IF		14. PROJECT STREET ADDRESS (if applicable)					
CFAC discharge pond area proximal to Flathead River		Address 2000 Aluminum Drive					
15. LOCATION OF PROJECT Latitude: •N 48.388931	Longitude: •W -114.137434	City - Columbia Falls	State- Montana Zip- 59912				
16. OTHER LOCATION DESCRIPTIONS, IF KNOWN (see instructions)							
State Tax Parcel ID	Municipality						
Section -	Township -	Range -					

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PREVIOUS EDITIONS ARE OBSOLETE.

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17. DIRECTIONS TO THE SITE From Glacier Park International Airport (417) 1. Follow Glacier Airport Rd to US-2 E. At to 2. Turn left onto US-2 E (4.5 mi) 3. Turn right to stay on US-2 E (2.5 mi) 4. Turn left onto 4th Ave W (0.5 mi) 5. Continue onto Railroad St (0.8 mi), continue onto Aluminum Dr (1.0 mi)	he traffic circle, take the 3rd exit and st	ay on Glacier Airport Rd (0.1 mi)					
18. Nature of Activity (Description of project, inclu See attached.	de all features)						
19. Project Purpose (Describe the reason or purpose of the project, see instructions) Complete soil borings and monitoring wells to assess environmental conditions as part of a Remedial Investigation/ Feasibility Study (RI/FS) of the Columbia Falls Aluminum Company site. The soil boring and sampling is specified in the RI/FS Work Plan, dated November 23, 2015, approved by USEPA. The work is being conducted pursuant to an Administrative Order of Consent (Cercla Docket #08-2016-0002) between Columbia Falls Aluminum Company and the United States Environmental Protection Agency (USEPA).							
USE BLOCKS	20-23 IF DREDGED AND/OR FILL MATER	IAL IS TO BE DISCHARGED					
20. Reason(s) for Discharge							
21. Type(s) of Material Being Discharged and the Type Amount in Cubic Yards	Amount of Each Type in Cubic Yards: Type Amount in Cubic Yards	Type Amount in Cubic Yards					
Surface Area in Acres of Wetlands or Other V Acres or Linear Feet	Vaters Filled (see instructions)						
23. Description of Avoidance, Minimization, and 6	Compensation (see instructions)						

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24. Is Any Portion of the Work Already Complete? Yes No IF YES, DESCRIBE THE COMPLETED WORK								
25. Addresses of Adjoinir	ng Property Owners, Lessee	s, Etc., Whose Property Ad	ljoins the Waterbody (if mo	re than can be entered here, please a	attach a supplemental list).			
a. Address- 2000 Alum	inum Drive							
City - Columbia Falls		State - Montana	Zip - 599	212				
b. Address-								
City -		State -	Zip -					
c. Address-								
City -		State -	Zip -					
d. Address-								
City -		State -	Zip -					
e. Address-								
City -		State -	Zip -					
	ites or Approvals/Denials rec	ceived from other Federal, S IDENTIFICATION						
AGENCY	TYPE APPROVAL*	NUMBER	DATE APPLIED	DATE APPROVED	DATE DENIED			
NII								
	t restricted to zoning, building made for permit or permits		ibed in this application. I	certify that this information	in this application is			
complete and accurate. applicant.	I further certify that I possess	s the authority to undertake						
Star SIGNATURE	of APPLICANT	5-11-2016 DATE		rung hotto TURE OF AGENT	2016-05-11 DATE			
The Application must be signed by the person who desires to undertake the proposed activity (applicant) or it may be signed by a duly authorized agent if the statement in block 11 has been filled out and signed.								
18 U.S.C. Section 100	1 provides that: Whoever falsifies, conceals, or con	r, in any manner within t	he jurisdiction of any d					

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fraudulent statements or representations or makes or uses any false writing or document knowing same to contain any false, fictitious or

fraudulent statements or entry, shall be fined not more than \$10,000 or imprisoned not more than five years or both.